

## **SECTION I     ADMINISTRATION**

### **A.     DESIGNATION OF AUTHORITY**

The Governor has designated the Department of Workforce Development (DWD) as the state agency responsible for development of the State Refugee Services Plan and for supervising the administration of the Plan. Responsibility for administration of the program has been delegated to the Bureau of Migrant, Refugee, and Labor Services (BMRLS) within the Division of Workforce Solutions.

The State Refugee Coordinator is Susan Levy, Chief of the Immigrant Integration Section (IIS) of the BMRLS.

### **B.     ORGANIZATION**

IIS plays the lead role in state resettlement activities, assuming responsibility for planning, contract administration, monitoring, coordination, and technical assistance. IIS was preceded by the Wisconsin Resettlement Assistance Office (WRAO), established in 1975 under the Division of Emergency Government, Department of Local Affairs and Development. In June 1980, the WRAO was transferred to the Department of Health and Social Services, Division of Community Services, and assigned responsibility for overall program coordination. In 1993, the WRAO was merged with Energy and Poverty Services, redesignated as Energy, Poverty and Refugee Services (EPRS), and transferred to the Division of Economic Support (DES). In 1996 Refugee Services was established as a separate unit of DES within the newly established Department of Workforce Development (DWD). DES was subsequently reorganized and named the Division of Workforce Solutions (DWS).

DWD is responsible for the state administration of all welfare and employment services, including Temporary Assistance to Needy Families (TANF), child care, child support, unemployment assistance, vocational rehabilitation, Welfare to Work, and employment services. The IIS is mandated to coordinate the refugee services of all elements of the Department. The primary focus for IIS lies within the Department's Division of Workforce Solutions. Welfare reform initiatives and state employment projects, such as the Temporary Assistance to Needy Families (TANF), the Food Stamp Employment and Training Program (FSET), the Workforce Investment Act, Workforce Attachment Act, and Welfare to Work are also housed within this Division, allowing refugee services to more fully interface with these critical program areas.

The IIS is directly responsible for the administration of all refugee social and employment services designed to facilitate refugee self-sufficiency. All services

are provided through contracts with other state agencies, counties, or local service providers. Voluntary resettlement agencies, community action agencies, and Mutual Assistance Associations (MAAs) are utilized heavily as the primary service providers. Contracts are awarded on an annual basis under a contract renewal process or a competitive Request for Proposals process.

DWD administers health screening services. Refugee Medical Assistance benefits are administered by the Division of Health Care Financing in the Department of Health and Family Services, under a Memorandum of Understanding with DWD.

## **C. ASSURANCES**

The Wisconsin DWD stipulates that it will, as required under 45 CFR 400.5(i):

- 1) Comply with the provisions of Title IV of the Immigration and Nationality Act and official issuances of the Office of Refugee Resettlement (ORR) Director;
- 2) Meet all federal requirements as specified in 45 CFR, Part 400;
- 3) Comply with all other applicable federal statutes and regulations in effect during the time that grant funding is received; and
- 4) Amend the State Refugee Services Plan as necessary to comply with standards, goals, and priorities established by the ORR Director.

The state assures that, as specified under 45 CFR 400.5(g), assistance and services funded under the State Plan are provided to refugees and asylees without regard to race, color, national origin, ancestry, religion, sex, age, disability, marital status, sexual orientation or political opinion and affiliation. Throughout this plan, unless otherwise noted, the term refugee will apply to all those eligible for services under PL 96-212.

As specified in the State Monitoring Section, on-site program reviews are conducted on a regular basis to assure that these requirements are fully met. Annual contracts with all vendors contain legally binding language to this effect. Service providers are further required to meet state Civil Rights and Affirmative Action requirements, both for service delivery and agency employment practices. Local agency plans are reviewed and filed with the State Affirmative Action/Civil Rights Office. Funding decisions are reviewed annually to assure that there is an equitable distribution of program revenue which is consistent with the composition and service needs of the refugee population.

As specified under 45 CFR 400.5(h), the IIS will convene quarterly meetings of the State Refugee Advisory Committee. Composition of this committee shall include representatives of local affiliates of voluntary agencies, local community agencies, including MAAs, employment agencies, health agencies, and schools. State and local governments shall also be represented to the fullest extent possible. The State Advisory Committee shall be the primary vehicle to consult

with affected agencies to plan and coordinate the appropriate placement of refugees in advance of their arrival.

## **LIMITED ENGLISH PROFICIENCY**

**Limited English Proficiency.** The Immigrant Integration Section is committed to ensuring that all persons with Limited English Proficiency (LEP) will receive appropriate, meaningful language assistance so that they can access services and benefits. IIS, its contractors, and sub-contractors will assure compliance with ORR State Letter #00-18 and the Office of Civil Rights guidelines by developing and implementing policies as indicated below.

**Assess Language Needs.** The initial departmental assessment of language needs indicates that Spanish and Hmong are the primary languages of individuals served. IIS monitors new arrivals on a continual basis, and translates certain vital documents into the languages of those new arrivals, including into Bosnian-Croatian-Serbian and Russian.

**Written Translations.** The IIS is spearheading a drive to translate at least vital documents, including forms and brochures, into Spanish and Hmong, as well as several other languages. Changing refugee language needs are assessed at the quarterly Advisory Committee meetings.

**Develop and Implement Written Policies.** All service contracts require compliance with Title VI of the Civil Rights Act and major service providers are required to develop and submit a compliance plan, which will include a language access portion. Contracted service providers are required to assess the demographics of their population in their annual service plans and assure that bilingual staff or interpreters are available to meet the oral language needs of those populations.

**Notice to LEP Persons.** IIS monitors new arrivals and ensures that agencies with which it contracts employ appropriate bilingual staff so that refugees are served in a linguistically competent way. Legal notices concerning benefits eligibility are generated by a mainframe computer system. The IIS is working to identify ways in which key notices can be generated in multiple languages.

IIS currently has an **interpreter training** program and is working with the Supreme Court and state offices of equal opportunity, to assure that qualified interpreters are available to help those with LEP.

**Staff Training.** Training on Civil Rights Compliance and the new LEP Guidelines has been provided at our Annual Refugee Services Conference and to employment and training providers.

**Monitoring.** LEP guidelines are being incorporated into our monitoring procedures. We monitor our contract agencies on an ongoing basis, including periodic site visits.

## **SECTION II ASSISTANCE AND SERVICES**

### **A. CASH AND MEDICAL ASSISTANCE**

The Division of Workforce Solutions, which includes the Immigrant Integration Section, is responsible for the administration and supervision of Refugee Cash and Medical Assistance (RCA and RMA) and TANF. The Bureau of Workforce Programs within the Division has responsibilities for the TANF program. Since most welfare-dependent refugees receive Temporary Assistance to Needy Families (TANF), the primary means to encourage refugee recipients to seek employment and economic self-sufficiency is through the required participation in employment search, work experience, and education (including ESL), as mandated for all public assistance recipients under the TANF program.

Refugee service providers and community leaders have been active participants in the development of refugee employment strategies in each impacted community. Some of the vendors under contract with the IIS also have employment sub-contracts from TANF (W-2) agencies, which allow a full service continuum for refugee participants.

The state of Wisconsin will continue to administer its RCA program consistent with its TANF program, under the provisions of 45 CFR 400.65-400.69, using agencies contracted for Wisconsin Works (W-2). W-2 agencies administer the program on the local level, and some of these agencies are private.

Eligibility for refugee cash and medical assistance shall be based on the criteria used in the state's TANF (W-2) and MA programs (except where these requirements differ from the requirements in 45 CFR 400). Consistent with 45 CFR 400.66 (b), (c), and (d), the state will not consider any cash grant received under reception and placement (R&P) programs as income when determining income eligibility. Nor will resources remaining in the applicant's country of origin be considered.

Consistent with TANF, refugee cash assistance will consist of three payment levels: trial jobs, community service jobs (including custodial parents of an infant), and W-2 T, assigned on the basis of level of job readiness. Participants must report any change in earned or unearned income within ten calendar days of the occurrence. The notice standards applicable in the TANF program shall also be used for the refugee cash and medical program.

All refugees qualify for RCA benefits from the date of application. Refugee families with minor children will enroll in W-2. Refugees determined ineligible for cash assistance under the TANF program will have their eligibility determined for refugee cash assistance. The state interprets the phrase in 45 CFR 400.53(a)(2) “are ineligible for TANF” to mean, consistent with 45 CFR 400.51(a), “are ineligible for TANF cash assistance.” However, refugees sanctioned for non-participation in W-2 will not be eligible for refugee cash assistance. The state will use the fair hearing procedure used in food stamps and medical assistance to resolve disputes.

As a condition of eligibility for refugee cash assistance, all refugees must participate in employment and self-sufficiency services within 30 days of receipt of cash assistance. There will be no exemptions from participation.

In accordance with 45 CFR 400.68, the W-2 agency will notify the local resettlement agency that provided for the initial resettlement whenever the refugee applies for RCA. The W-2 agency will coordinate employment services with the resettlement agency and inquire if the refugee has quit/refused employment. A refugee is not eligible for cash assistance if he or she has quit or refused employment within 30 days prior to application.

Participation in employment-related services will include any allowable refugee social services, as identified in the self-sufficiency plan developed by the case manager in consultation with the client. Failure to participate in prescribed activities will result in a reduction in the grant amount.

Refugee cash and medical assistance shall be provided only to persons who have been designated as refugees and asylees pursuant to P.L. 96-212, Cuban/Haitian Entrants pursuant to P.L. 96-422, and others who have been given any of the Immigration and Naturalization Services admission statuses which have been identified to the state agency as eligible for refugee assistance. The provision of refugee cash and medical assistance is contingent upon the Secretary of the United States Department of Health and Human Services or an authorized designee providing, in advance, grant authority to the agency in amounts sufficient to enable it to provide for cash and medical assistance to eligible refugees and for the identifiable and reasonable administrative costs of providing such assistance.

Refugee Medical Assistance (RMA) shall be provided in the same manner and to the same extent as provided under the MA Program under Title XIX of the Social Security Act, except that categorical relatedness shall be waived. Eligibility for RMA shall be limited to the first eight months of a refugee's residence in the United States. A refugee's available income and resources on the date of application will be considered in determining eligibility. Neither R&P income nor refugee cash assistance may be counted in determining eligibility for RMA. If a refugee, who is receiving Medicaid, becomes ineligible for Medicaid because of hours of work or earnings from employment, the refugee must be transferred to

RMA without an eligibility redetermination and will remain eligible until (s)he has lived in this country for eight months. In addition, as indicated in Section II-E of the Plan, outreach and initial screening services, in accordance with the protocol previously approved by the Office of Refugee Resettlement, may be provided by any public health agency under contract, to any person without reference to any eligibility criteria other than refugee status under P.L. 96-212 (see copy of screening protocol attached).

## **B. SERVICES**

To assure that planned services meet the employment needs of refugee families, the W-2 agencies or the employment service agencies under state contract must develop a family self-sufficiency plan for all refugees who receive employment-related services. These plans are used as the primary case management tool to assure a continued focus on the goal of early employment and self-sufficiency.

All refugees receiving cash and/or medical assistance are required to meet all applicable work registration conditions. Family self-sufficiency plans and individual Employability Development Plans (EDPs) must specify a clear employment objective and concrete, time-limited steps to obtain that goal. Individual EDPs are to be updated at least every six months and must address concurrent language training needs and employment service needs of the individual and/or family.

As a condition of eligibility to provide services, all vendors must demonstrate the ability to provide linguistically and culturally competent services and a commitment to the use of bilingual, bicultural women as service staff to the fullest extent possible. As an integral part of the annual contract process, all vendors must submit a written plan which assures that women have the same opportunity as men to participate in funded services. All Quarterly Performance Reports (QPR) for Employment and Training Services submitted by the agencies must contain the number of refugee women served. Likewise, the family self-sufficiency plan must fully address the needs of female members of the household. Each agency, prior to contract finalization, is required to submit a written action plan which assures that services will be provided to refugees in the following order of priority:

- 1) refugees in the United States (U.S.) 12 months or less;
- 2) refugees receiving cash assistance;
- 3) unemployed refugees; or
- 4) employed refugees in need of services for retaining employment or attaining independence.

All vendor contracts funded with refugee social service formula funds are limited to the provision of services to refugees in the U.S. 60 months or less. Allowable exceptions are for information and referral or interpreter services and citizenship

assistance. Since most refugee service providers have a variety of federal, state and local funding, most are able to continue to serve both time-eligible and time-expired refugees.

### **C. CUBAN HAITIAN ENTRANT PROGRAM (CHEP)**

IIS, the state agency responsible for administration of the Refugee Services Plan, is also responsible for the CHEP Plan. In accordance with 45 CFR 400, Cuban/Haitians served under Cash and Medical Assistance (CMA) and social services are served in the same manner and level as refugees are served. The state provides assistance and services to eligible Cuban and Haitian entrants without regard to race, religion, nationality, sex, or political opinion.

In designing/delivering services to Cuban/Haitian entrants, Wisconsin will comply with:

- 1) The provisions of Title IV, Chapter 2 of the Immigration and Nationality Act;
- 2) Official issuances of the ORR Director;
- 3) All applicable regulations; and
- 4) The provisions of the State Refugee Services Plan including medical screening and treatment.

### **D. UNACCOMPANIED MINORS [INA §412(d)(B)(i)]**

The following social services will be provided on an as needed basis to unaccompanied minors through purchase of service contracts between the Wisconsin Department of Workforce Development and the Department of Health & Family Services and local social service agencies, and through direct services provided by the Wisconsin Department of Workforce Development:

- 1) Legal responsibility for unaccompanied minors up to their 18th birthday;
- 2) Placement in foster homes, group homes, institutional placement or independent living arrangements, based on the needs of individual children;
- 3) Necessary language education, employment services, vocational training, medical assistance and social services to assure successful acculturation and family reunification, if possible; and
- 4) Continued services up to age 21, as appropriate, under the authority outlined in Wisconsin Statutes Chapter 48, Children's Code.

As the minor approaches emancipation, all services will be based upon an employability development plan and voluntary services agreement designed to ensure that the client is self-sufficient by the time of emancipation.

In addition, unaccompanied minors identified after their arrival in Wisconsin will receive similar social services.

## **E. HEALTH MONITORING**

Primary health care, including screening, will be provided by a combination of public and private providers. Local health, voluntary agency, and social services personnel will instruct sponsors and refugees to initiate medical services and screening according to the state protocol within the first month after arrival. All screenings under the protocol approved by the Office of Refugee Resettlement for use of Refugee Medical Assistance funds will be for refugees in the U.S. 90 days or less. Sponsors will be encouraged to notify the local public health department if services are obtained privately and/or if problems are encountered. Follow-up services for clients in the United States more than 90 days will be provided only to those who are determined to be RMA-eligible.

Health assessments will be conducted for secondary migrants who are within 90 days of arrival in the U.S., if public health agencies become aware of their arrival, to ensure that appropriate immunizations and care have been initiated and/or completed.

For cases admitted with public health waivers, the state Division of Public Health will send notification of arrival forms to the public health agency having jurisdiction in the community of resettlement, with instructions for appropriate outreach and follow-up on cases admitted under medical waivers for active tuberculosis and sexually transmitted diseases will be mandatory. Public health agencies will provide public health services and education to refugees on the same basis as other residents, through the use of bilingual staff, volunteers, publications, and other community resources. The Immigrant Integration Section will issue contracts for health screening services using Refugee Medical Assistance (RMA) funds and will provide contract monitoring.

## **F. MONITORING PLAN**

All contracted agencies funded under this plan submit detailed Quarterly Performance Reports (QPRs) along with supporting documentation. These reports are reviewed by the state contract administrator against the previously negotiated annual/quarterly goals. Benchmark criteria in employment contracts include placements, grant reductions/diversions, and self-sufficiencies. Measurable, specific annual/quarterly outcome goals have been established for other refugee programs and are monitored closely.

Individual agency reports are compiled and submitted to ORR on a quarterly or semi-annual basis. Any agency experiencing significant performance problems for two consecutive quarters is required to submit a detailed Corrective Action Plan to ensure program improvement and compliance. In addition to frequent



informal technical assistance and consultation, IIS staff conduct periodic formal, on-site reviews of all service providers. Whenever possible, these are jointly conducted with appropriate ORR staff. Written follow-up reports are submitted to the agency. Where appropriate, state DWD staff from other programs are invited to participate/observe. In the case of MAAs and other community-based organizations, inclusion of board representatives is encouraged. Also, when agencies receive program revenue from other state sources, representatives from these funding sources are invited to participate when appropriate. IIS utilizes a bicultural team approach in monitoring, with a lead assigned contract administrator for each agency.

In addition to extensive technical assistance from IIS staff, the Division of Workforce Solution's Training Section, in concert with the IIS staff, provides in-service trainings on a wide variety of program issues/developments. In-service training is provided to both agency staff, board members and refugee community leaders. IIS staff also participate in local agency retreats and training sessions.

Refugee Medical Assistance (RMA) services and payments are incorporated into the Medical Assistance (Title XIX) program administered by the Division of Health Care Financing. Fiscal controls and quality assurance procedures for that program are applied to RMA.

Refugee cash assistance benefits are issued by TANF agencies in accordance with state guidelines. A review of refugee cash assistance is included in the annual, independent single agency audit.

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